

THE

ANNUAL ADDRESS

BEFORE THE

Philadelphia County Medical Society.

Delivered February 8, 1854.

BY

JOHN F. LAMB, M.D.,

THE LATE PRESIDENT.

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1854.

Resolved, That a Committee of three be appointed to request of Dr. J. F. LAMB, a copy of the Address, delivered by him this evening, on the occasion of his retirement from the office of President of the Society, and that the same be published.

Committee—Drs. JEWELL, THOMAS, and TURNBULL.

Extract from the Minutes of a conversational meeting of the Philadelphia County Medical Society.

February 8, 1854.

ANNUAL ADDRESS.

GENTLEMEN OF THE PHILADELPHIA COUNTY MEDICAL SOCIETY:—

IN addressing you on this occasion, you will not be surprised at my acknowledgment, that I feel not a little embarrassed—first, in appearing before a Society, numbering among its members the most talented, the most accomplished, and the most highly honored of the medical profession in America; names so well known at home and abroad, as to give character to the place, and to elicit a compliment from a conspicuous teacher in one of the Parisian Medical Schools, who, in introducing a stranger to his French class, added that he was from Philadelphia, the great centre of Medical Science in America, as Paris was in Europe. And secondly, I am perplexed, in finding a subject as my text, which has not been already worn threadbare. In addition to all which, it is my fortune to succeed a gentleman, whose ready pen is never at fault—and whose profound erudition is well calculated to throw a shade over any effort which does not reach far above mediocrity. Notwithstanding these apparently insurmountable difficulties, there are considerations which will sustain, and give me some degree of freedom, while I advert briefly and plainly, perhaps without much order, to some subjects which may be calculated to promote the objects aimed at and cherished by this Society; and shall then proceed to make some observations intended especially for the consideration of the junior members of the profession who are here present.

This Society, constituted as it is, ought to have enrolled among its members every respectable and orderly member of the profession, in the city and county of Philadelphia. The means for the accomplishment of this end, lies within ourselves. It will be admitted that there is no member enrolled here who has not a certain

degree of personal influence; and it is probable that the acquaintance of our members will embrace the whole number of medical practitioners within our jurisdiction. If each member feels personally an abiding interest in our ultimate full success, let that influence be brought into action: first, in bringing into our association all who would be properly entitled to membership—and then in promoting an interest in their attendance and participation in the active duties of the Society. With a little increased attention and co-operation of the members already interested, our meetings for reading papers, and conversation on subjects connected with Medical Science, could be made not simply interesting, but really attractive. The plan which has been adopted, of submitting a carefully prepared paper on the subject proposed for discussion, is, that which is perhaps best calculated to give origin to inquiries and judicious criticisms, drawing out the experienced members of the profession, and giving confidence to the intelligent inquirers after knowledge, who profit by the practical observations of age. But, this is not all which may be done. When the subject for the evening does not fully occupy the time, volunteer contributions would, I have no doubt, be received and listened to with pleasure. In a population of half a million, and in a city so famed for the skill of its professors, interesting and rare cases must be of daily occurrence. If a portion of those rare cases were communicated at our conversational meetings, they would add very materially to the interest and value of those meetings; and would induce a more general attendance. This, too, is the place where young and inexperienced members of the profession who wish to be informed, may state a case, and with propriety, ask to be instructed or advised. Light will in this manner be thrown on subjects which, to some well-informed minds may have been hid in obscurity, and this light does not remain fixed or confined to the profession; it becomes a reflected light, our patients—the community at large participate in the advantage.

Permit me, gentlemen, in conclusion of these general remarks, to speak in commendation of the spirit in which the discussions in this Society are usually conducted. To make this a desirable place of meeting, for mutual improvement, the import of each sentence and word should be carefully weighed as regards its especial bearing on the character, attainments, and feelings of each and every

associated member. Let the sound Christian principle of doing as you would be done by, predominate. Say, or do, nothing to wound the pride or sensitive feelings of a brother. And if in the heat of discussion a word should happen to be uttered which is calculated to wound and to produce discord, be not tardy in making satisfactory atonement for the unintentional wrong—that it may be clearly manifested to all who attend here, that we have no ulterior objects in view but mutual improvement, and the elevation of our professional standard.

I would now respectfully claim some of the attention of the less experienced gentlemen who frequent this hall, while reverting to practical observations; or perhaps it would be more correct to say, that the remarks which I shall address to them, are founded on experience, but so much out of the ordinary track of advice to young graduates, that they may smile at their novelty and simplicity, and turn from them as not worth remembering. If, however, one young gentleman present feels sufficiently interested to remember, and should a score of years hence feel that I have made any one remark worthy of recollection, and by which he shall have received benefit, my object will have been attained.

I shall pass over the stereotyped paragraph of professors to their graduating class, "that they are just then entering on the threshold of their studies as well as duties," with but one observation, that, having been actively and sometimes oppressively engaged in the various branches of the practice of medicine for more than forty years, during all of which time I have felt the necessity of being still a student, my feelings are now, that practice and study must not, cannot be separated with safety—that the Doctor in medicine, no matter how conversant he may be with all ancient and modern authorities, if he does not read and keep up with the advances in science of the age and the day in which he lives—if he does not make a separate and distinct study of each and every case brought under his notice for advice and aid, is not qualified to do justice to his patient, and much less to advance the interest and elevate the character of the profession.

Much of the success of a young physician will depend on his general deportment. This, gentlemen, is a subject, perhaps I may say with truth, of extreme delicacy; on which very many words might be used, and with but little advantage. No two men are

alike—the nature of the man cannot be changed. The education and refinement which we suppose pre-eminently to belong to and form a part of the character of an accomplished physician, would seem to indicate that some general rules might be propounded, which would be worthy of special observance. And if there are any words in the English language, capable of conveying my idea of what should be the manners of the physician, as connected with his daily intercourse with his patients, I should comprise that idea in the words, simple, gentle, and dignified. As a general rule, the physician should be courteous and kind to his patients. That medical practitioner whose refinement of manners, whose humane attention to his patients, which ought always to be graduated by the urgency of the case, wins the good feelings, and consequently the confidence of his patient, will always practice with success, and with pleasure to himself. And let me say to the beginner, that, with due regard to this maxim, his patients never die. He cannot always arrest the course of disease; death in many cases must be the result; but then, all the duties of the young physician having been conscientiously discharged in a manner consistent with the principles of humanity, that patient is not really lost, because the Doctor has made a favorable impression. I would add here, that your attentions should not be confined exclusively to adults. Most nurses, and many indiscreet mothers, lay the foundation in the minds of children for great horror, of anything called a Doctor. You will be often led to feel very sensibly, the great difficulty in prescribing understandingly, and with advantage, for a child who screams at your approach, and whose struggles render it impracticable to make any satisfactory observation connected with the circulation. Children have common sense, and may be conciliated. You may, after repeated visits, convince the little thing that you are not a barbarian nor a butcher. But your efforts should be earnestly and zealously directed in all families where you meet children, to notice them as occasion offers—cultivate their acquaintance, treat them gently, and you soon win their confidence. In this, there is nothing undignified. Then in case of their sickness they have no fear, and will hold out the little hand, and place it in your power to form some judgment of the circulation, which is most important in the judicious treatment of the diseases to which they are subject. Again, after a few years of practice, when by a combination

of all the means at your command, connected with a due exhibition of discretion and skill, you have established for yourself a character, and secured the confidence of your patients, your task becomes much less burdensome. I have long since become a believer in the doctrine, that there are many cases in which the faith of the patient goes very far in aid of your prescriptions. Where the mind is perfectly at ease, so far as your skill and attention is concerned; where the confidence of the family induces them to carry out fully, and to the letter, each and all of your prescriptions; I believe that patients will often be restored, who, with the same amount of disease, but with less trust in the doctor, and a little less attention to the prescriptions, would surely die.

The truly prudent and cautious physician will seldom give what may properly be called a hasty opinion. Mischief, or extreme mortification, may sometimes result from precipitancy. The friends of the patient will generally question the doctor at once, on his first visit, as to the name of the disease. Take care that your diagnosis be assuredly correct before you venture to give it a name. It is not the name for which you prescribe, and therefore you may reasonably and truly say, that you address your remedies to the symptoms, not to the name. Permit me to illustrate by an example: I know that doctors do not often feel inclined to expose their own blunders, but a truthful confession of error is not without a wholesome influence, and my present remarks are intended for your benefit, regardless of my own character. Some years since, I was called, in the evening, to see a young lady of fifteen, whose condition seemed too plain to admit of any mistake; there was exhibited in this case considerable fever, an excited state of the circulation, and of the patient's mind, with a diffused scarlet blush prevailing generally over the body, and, to some extent, over the extremities. The face and breast were particularly red, with the usual florid appearance of the tongue and fauces, with external tenderness, and a slight appearance of tumefaction of the glands about the neck. Scarlet fever, at the age of fifteen, is not by any means of so common occurrence as at the age of five years, but cases do occur at fifteen, and beyond. It was then the prevalent disease, and I therefore felt perfectly safe in pronouncing it, without hesitation, Scarlet Fever. On visiting my patient the next morning, I found, much to my surprise, that the general scarlet

blush had subsided into tolerably well defined rubeolous spots, slightly elevating the centre, giving a sensation of roughness to the finger in passing it over the surface of the cuticle. Here, at once, an error in diagnosis was perceptible; but one which is not at all uncommon; for it is well known, that there is sometimes extreme difficulty in marking the line of distinction between measles and scarlet fever; at a time, too, when it may be of incalculable importance to the safety of the patient to be clear in your convictions as to the real character of the disease. In this particular case, there had yet been no harm done by the mistake; and, as a matter of course, I confessed that my opinion of the previous evening had been made up with too much haste, and unhesitatingly pronounced it Measles—feeling very well assured that there could be now no fear of going wrong; the spots indicated so distinctly the peculiar colour, the irregularity of size, but still defined character, with the slightly elevated surface; then there was the sneezing, with the little dry cough, the inflamed and watering eyes. Nothing could be more clear in distinguishing one disease from another. The usual prescriptions were made, and the patient left in the care of an excellent nurse. In my usual routine of duty, the patient was visited on the succeeding day. On entering the darkened chamber, the nurse was requested so to adjust the curtains and blinds as to admit a little more light, in order that I might see the tongue and the general aspect of the patient; and I will leave you to imagine what were my feelings, on seeing that the little elevated points were assuming the unmistakable character of variolous pustules. Now, these were errors of diagnosis, which I can well believe might have happened in the most experienced and the most careful hands. The magnitude of the error consisted in speaking positively. If, at my first visit, I had said: “The case has the appearance of scarlet fever;” and, at my second: “It looks, to-day, more like measles than scarlet fever;” or, if I had said, what is strictly true, “That the various grades and characters of eruptive diseases are sometimes distinguished with great difficulty,” I should have been, politically, not committed. I have witnessed a case where very serious inconvenience, and great alarm of a community, has resulted from one of these hasty opinions. In a southern town, where I first began to read on medical subjects, the place was

thrown into a state of real consternation, by the unqualified announcement of a case of smallpox. The case was in the hands of the doctor of the place, a gentleman of undoubted skill and of thirty years' experience. A general consultation of some half dozen doctors advised the mayor and authorities of the town to have forthwith erected a smallpox hospital some miles out in the woods, to which place the patient was removed, where all the doctors and students of the town met daily to watch the progress of the malady. On the sixth day of attendance, in general consultation, the case was formally reconsidered, and pronounced to be only varicella!

You should not be less careful in expressing an opinion as to the final result of disease. The physician should always be honest in his prognosis; never attempt the restoration of your patient by promising a cure. Charlatans promise to cure; discreet and regular members of the profession, never. In the most simple and mild cases, it is rarely prudent to say, in so many words, that there is no danger. The common sense of the discreet practitioner will always be ready, with some appropriate answer to the anxious inquiries of friends. I shall never forget an answer, which seemed abrupt, given by one of our most eminent surgeons, many years since—a name which will ever be held in remembrance and honored so long as Physick continues to be in any way connected with the University of Pennsylvania. His answer gave me a lesson in medical etiquette, as well as in prognosis. He was called to consult with me in a case of rather serious aspect; and when about to step into his carriage, was asked by a brother of the patient, what might be the probable issue of the case. Bowing politely, but with coldness, as was his custom, he replied: "Doctor Lamb will tell you what we think." The brother, not satisfied with the answer, responded: "But, sir, do you think there is any danger?" The quick reply was: "Danger, there is, sir, danger in everything—there is danger in my stepping into this carriage."

You may be called to a child attacked, apparently, with some mild form of fever—it may be connected with dentition or catarrh; the anxious young mother is told, in answer to her question, that there is no danger. Before the day closes, convulsions come on, and the next day the child is dead. Your unguarded answer has, in all probability, resulted in the loss of the confidence of the family,

their loss to you, as patients, together with their influence among friends. There are a great number of cases, in which to-day your patient is to all appearance convalescent; from error in diet, or from some unexplained cause, to-morrow your patient may die. But there is another aspect of prognosis deserving of some consideration. You may, with perfect safety and propriety, say, that the patient is seriously or dangerously ill; that the disease may prove obstinate; or that his recovery is extremely doubtful. But there are few cases in which the prudent physician will be justified in saying emphatically, there is no hope. He ought never, in the common acceptation of the term, give up a patient. I will give you one more example to enforce this general principle. At a time when I was young in practice, and in a sickly season, burdened with more cases than I could with convenience attend, my attention was called to the case of an habitual drunkard: It was a case of the then prevalent remittent fever. With his impaired constitution, it very soon exhibited the usual symptoms of a typhoid termination. Deep coma had continued for three days; the eye was open and fixed, entirely insensible to the influence of light; the powers of deglutition were suspended; the pulse was like a thread, scarcely perceptible, and too frequent to count; the breathing hurried and much obstructed by the rattling mucus in the air-passages; the extremities cold, and covered with a clammy sweat; the inferior were cold to the middle of the thighs, and the knees as stiff as if he were already dead. In short, he was, to all appearance, in *articulo mortis*. I frankly told the wife, who was his nurse, that nothing more could be done, except the attempt to warm the extremities by the usual appliances, and a continuance of the brandy, or some other liquid, just in sufficient quantity to keep the tongue moist. My time was otherwise occupied. My visits to him were discontinued. The man was then about forty years of age. He is now seventy, still living. His recovery, though, was imperfect. He has continued to live in a state of mental and physical imbecility. I must remark that the wife of that man is a very sensible woman, which may account for the singular fact that I did not lose the practice or the friendly influence of the family.

In closing what I have to say on the subject of injudicious haste in the expression of opinions, I wish not to be misunderstood. I recommend caution; there are but few men endowed with that kind

of intuitive knowledge, which would enable them, like the renowned Radcliffe, to see at a glance, the disease and its end; but by a judicious exercise of this foresight, a physician acquires the greatest reputation; and when his prognosis is the result of mature experience, he is entitled to be bold. Besides, the fears, the doubts and anxiety of the friends of the sick ought to be taken into account; they have a right to the consolation of certainty, and the doctor ought not to be over-scrupulous of his reputation, nor intrench himself too much in the security of an ambiguous answer. His duties demand discretion and humanity; in circumstances of danger, he is called upon to give to the friends of the patient timely notice of its approach. To the sick, he should be the minister of hope and comfort, that, by such cordials, he may raise the drooping spirit, and smoothe the bed of death. That "the doctor should go out at one door when the clergyman enters in at the other," is a quaint conceit, more expressive of impiety than humor; for even when the life of the patient is absolutely despaired of, the presence of a man of compassionate and feeling heart will prove highly grateful and useful to the dying sufferer, as well as to his nearest relations.

I have spoken freely of errors of judgment, and the impropriety of forming and giving expression to opinions which have not been duly weighed. But, gentlemen, I must go further, and say that no physician, in the discharge of his professional duties, should ever be in haste. That medical attendant who reaches the bedside of his patient, out of breath from the rapidity of his movements, both agitates and alarms his patient, and is himself in a state of excitement, which utterly disqualifies him from thinking or acting with the cool and sober deliberation which ought to characterize every movement of one in whom we expect the exercise of skill and sound judgment. It may be excusable in a dashing young doctor, who is the owner of a fine establishment, to drive furiously through the highways and byways of city or country, until he becomes known; he may thus attract the notice and wonder of the ignorant and vulgar; but, when he really has a patient to visit, if he wishes to make the impression that he has common sense with his learning, let him approach with only moderate speed, and let each movement be deliberate and without apparent excitement. It matters not how urgent the case, the friends and the patient become more favorably

impressed with the moderation and firmness of the doctor, who is prepared to prescribe with better effect, and to act with more energy and promptness, than if his physical and mental powers have been nearly exhausted by an unnatural, unnecessary, and undignified run.

I have sometimes been induced to fear that some young and inexperienced members of our profession, were a little too much inclined to rely on the length and frequent change of their prescriptions, for the cure of their patients. This is, I think, a mistake; and there are several cogent reasons why you should be cautioned on this subject. There are, assuredly, certain indications which may be considered very clear; and there are remedies from which, to a certain extent, you may calculate on positive results; but, in my mind, there is much doubt whether the multiplicity of articles is more to be relied on for producing those positive results. The length of your prescriptions and the frequency of their repetition, may impress some with the depth of your learning, and the wonderful resources within your command; but in the end you will perhaps realize the fact that your own impatience, or, what is still more to be deprecated, your desire to give the appearance of energy, and of being ever on the alert, has been at the cost of your patient's life; and, unless your patients have purses which are inexhaustible, they may form the uncharitable conclusion that your apothecary is your partner in business. Do not venture on the vain attempt to wrest everything from the hands of nature. Let your remedies be selected with care and judgment; but let them be few and simple. I should say that the most successful treatment of patients depended upon the exercise of sagacity, or good common sense, guided by a competent professional knowledge; and not by following strictly the rules of practice laid down in books, even by men of the greatest talents and experience. It is very seldom that diseases are found pure and unmixed, as commonly described by authors, and there is an almost endless variety of constitutions. The treatment must be adapted to this mixture and variety, in order to be as successful as circumstances will permit; and this allows of a very wide field for the exercise of good common sense on the part of the physician. And, gentlemen, let me endeavor to impress on your minds that the last thing a physician learns in the course of his experience, is to know when to do nothing, but quietly to wait, and

allow nature and time to have fair play in checking the progress of disease, and gradually restoring the strength and health of the patient.

To judge of the true skill and merits of a physician, requires a competent knowledge of the science of medicine itself; but to gain the good opinion of the patient or his friends, there is, perhaps, no method so ready as to show experience in the regulation of the diet of the sick. Discretion and judgment will of course be required; the rules should not be unnecessarily severe or rigid, otherwise they will not be followed; but the prudent physician will prescribe such laws as, although not the best, are the best that will be obeyed. In many cases, however, it is not enough to say, "you must avoid meat, fermented liquors, or pastry;" all this is infinitely too vague, too general, and unsatisfactory. You must be precise and peremptory about trifles. In a long illness, the mind of the patient is enfeebled; the invention of his attendants has been exhausted, and they all like to be saved the trouble and effort of thought: the doctor, therefore, must think for them, and direct the diet of the sick, as he would his draught. Besides indicating an anxious solicitude for the comfort of the invalid, it shows a nice discrimination of the virtues and qualities of the ordinary articles of food, not possessed by less sagacious persons. It is in the judicious management of this branch of our art that French physicians particularly excel.

I fear that your patience is exhausted—my subject in its progress has increased somewhat beyond my expectations. In the remarks which I have made, it has not been my wish to bring into view any of the positive evils connected with our profession; or the vices of its members, if indeed they have any. Yes; there is a vice, and one only, against which it would be proper for me to bear testimony—if it were not too late—I should be late in my caution against this evil propensity to indulgence, at the time of graduation. Indeed, such is the rapid progress of the age in which we live, and the tender years at which the male youth assumes the habits and manners which, in the eyes of the world, constitute the mature and accomplished gentleman; that my precepts, to be of any use, should begin, and be enforced in the nursery. Above all the trades, arts, or professions, I have always thought that the use and the abuse of tobacco was most inapposite in the physician. And whenever a

young member of the profession feels that he is slow in winning the good opinion and confidence of the most amiable, and the most influential portion of the human family, I would most respectfully advise him to pause and examine himself, to ascertain whether the smoke or juice of the weed be not the repulsive power. On this subject, however, I shall say no more, as my views may be considered, and perhaps are, ultra.

But, apart from all mere professional attainments, the education, the habits, the refinement, which belong to, and ought to be inseparable from the character of the accomplished physician, make him, in the eyes of the world, emphatically a gentleman; and, I should say, beyond all other professional men, he ought to be a Christian gentleman. In this remark, I do not feel inclined to except even the clergy. With a great majority of them it is their preordained, as some of them would say, vocation or calling. It is truly their trade; and, whether really and indubitably pious Christians, or, as the world do sometimes judge, some of them wear a cloak, which may be laid aside, as some do their gowns when they descend from the pulpit, it must be conceded that, in all of that class of the clergy who are especially educated and set apart for the sacred duties of Christian teachers, there is a strong predominance of what may with much propriety be called religion of the head. But, gentlemen, the physician, who sees and knows the wonderful and intricate structure of the human frame, and who, as a thinking, an intelligent being, must look to the Author and finisher of such a work; who knows that his hold on life is so fragile that it may be severed in an instant of time; whose daily and hourly business brings him into close and direct contact with all the ills, sufferings, and depravities of poor human nature; not to say, also, that he may sometimes think the temptations to err are placed as plainly before him, and within his reach, as was the apple in the garden of Eden, has no room for the reception of Christian principles, except in the conscientious sympathies of the feelings. His Christianity is that of the heart, approved by the judgment. The physician should be not only pure, but unsuspected.

According to the custom of the early ages, in England, physicians united the clerical character with the medical, and, being thus learned in Physic and Divinity, were not unfrequently called in to administer the comforts of both professions. I have seen in

modern times, some bright examples of a similar union. Those who have paid much attention to what may be called the medical history of the Bible, will have observed how much the language of St. Luke, who was by profession a physician, differs from that of the other Evangelists. He was born a Syrian; yet, the reading of the Greek authors, while he studied medicine, made his language, without dispute, more exact. His style is sometimes even very flowing and florid; as, when in the Acts of the Apostles, he describes the voyage of St. Paul; and, when he has occasion to speak of distempers, or the cure of them, you must have observed, that he makes use of words more proper for the subject than the others do. It is, besides, remarkable that St. Luke is more particular in reciting all the miracles of our Saviour in relation to healing, than the other Evangelists are; and, that he gives us one history which is omitted by the rest; that of raising the Widow's son, at Nain.

I am not the advocate of a titled nobility; but, whatever may be the connections of our profession, it is one of noble bearing. The greatest philosophers of antiquity have devoted themselves to medicine. The inhabitants of Smyrna associated, upon the coins of that city, the names of their celebrated physicians with the effigies of their gods. And the Athenians, in order that the profession should be particularly exclusive, had a law that no slave, nor woman, should dare to study medicine. I am aware that amongst the Romans, our art was not held in such high esteem; but it is well known that, in the time of Julius Cæsar, when physicians came from Greece (the country whence the Romans derived all their polite learning and knowledge of the fine arts), they were complimented with the freedom of the Eternal City, a privilege of which that proud people were extremely jealous. Let it not degenerate in our hands! Never stoop to prostitute the dignity of the profession, through mean or sordid views of self-interest.

The physician should cultivate flexibility of temper, accommodating himself to the tone of feeling of the young, the old, the gay, and the sorrowful. He may be grave without moroseness, and pleasant without levity.

I cannot close this address without a respectful allusion to the fact, that, within the last year, some of the faces which we have been accustomed to meet here, as earnest inquirers after truth,

have ceased to appear in this hall, and will be seen no more among us. There is something in the death of a colleague peculiarly melancholy. His mind has been formed by the same studies; the same motives must have actuated his conduct; he must have been influenced by the same hopes and fears, and run pretty much the same course in life with ourselves; and, at his death, we are forcibly struck with the futility of all our plans, the emptiness and littleness of all our schemes of ambition.

Finally, gentlemen, accept my thanks for the honors which your indulgence has conferred on me; for the respect and kindness by which I have been sustained as your presiding officer; and especially for the patient attention which has been yielded to me this evening.